

 <div style="margin-left: 20px;"> United States Environmental Protection Agency Washington, DC 20460 </div>	<input type="checkbox"/>	Registration	OPP Identifier Number
	<input type="checkbox"/>	Amendment	
	<input checked="" type="checkbox"/>	Other	

Application for Pesticide - Section I

1. Company/Product Number 83529-84	2. EPA Product Manager Debra Rate	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Sharda USA LLC / Sharda Acetochlor 33% CS; ABN: Arrest CS	PM# 25	
5. Name and Address of Applicant (Include Zip Code) Sharda USA LLC c/o Wagner Regulatory Associates, Inc. P.O. Box 640 Hockessin, DE 19707 <input type="checkbox"/> Check if this is a new address	6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(I), my product is similar or identical in composition and labeling to: EPA Reg. No. 524-591 Product Name: Warrant	

Section - II

<input type="checkbox"/> Amendment - Explain below. <input type="checkbox"/> Resubmission in response to Agency letter dated _____ <input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____ <input type="checkbox"/> "Me Too" Application. <input type="checkbox"/> Other - Explain below.
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Explanation: Use additional page(s) if necessary. (For Section I and Section II.)

CSF Notification per PR Notice 98-10 to add alternate source of technical. This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under sections 12 and 14 of FIFRA.

Section - III**1. Material This Product Will Be Packaged In:**

Child-Resistant Packaging <input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Type of Container <input type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) HDPE lined bags								
* Certification must be submitted		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">If "Yes"</td> <td style="width: 50%;">No. per</td> </tr> <tr> <td>Unit Packaging wgt.</td> <td>container</td> </tr> </table>	If "Yes"	No. per	Unit Packaging wgt.	container	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">If "Yes"</td> <td style="width: 50%;">No. per</td> </tr> <tr> <td>Package wgt</td> <td>container</td> </tr> </table>	If "Yes"	No. per	Package wgt	container
If "Yes"	No. per										
Unit Packaging wgt.	container										
If "Yes"	No. per										
Package wgt	container										

3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container	4. Size(s) Retail Container 2.5; 5; 10; 110, 265 gal, Bulk	5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product
6. Manner in Which Label is Affixed to Product <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> Lithograph <input checked="" type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled </div> <div> <input type="checkbox"/> Other _____ </div> </div>		

Section - IV**1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)**

Name Anna Armstrong	Title Agent for Sharda USA LLC	Telephone No. (Include Area Code) (302)-510-0039 (anna@wagnerreg.com)
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.		
2. Signature 	3. Title Agent for Sharda USA LLC	
4. Typed Name Anna Armstrong	5. Date October 3, 2017	
6. Date Application Received <div style="border: 1px solid black; width: 150px; height: 40px; margin: 0 auto;"></div> (Stamped)		